

# STATE OF NEW HAMPSHIRE 2017 Statement of Income and Expenses

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

## **RECEIVED**

PLEASE PRINT

APR 25 2017

I. Name of Lobbyist(s) Carine Dumit			NEW HAMPSHIRE DEPARTMENT OF ST	
II. Name of lobbyist's partnership,	firm or corporation, if any:			
N/A				
(Name of partnership	, firm or corporation)			
81 Prospect Street	Brooklyn	NY	11201	
Business Address: (Street)	(Town/City)	(State)	(Zip Code)	
(845) <u>803-5390</u>	_ ( )	e-mail cdumit@sola	rcity.com	
(Telephone)	(Fax)			
III. This statement covers: (Choose reportable expense transactions with a second control of the second contro	nich are not attributable to a	ny one client).	·	
All reportable transactions occur	ring in the months prior to the	reporting date relative to the	following client:	
SolarCity				
•	Client as it appears on the Lobby	st Registration Form)		
OR  All reportable transactions by the inrelated to any particular client.	lobbyist (including the lobbyis	t's family), or the lobbying	firm listed below which are	
V. Date of Report April 26, 20 Reports cover: activity from date of		July 26, 2017		
October 25, activity from 7/1		January 31, 2018 activity from 10/1/17 to 12/31/1	17	
V. There have been no fees rece f this box is checked, complete just to Concord, NH 03301.	<u>-</u>		<u>-</u>	
/I. Check if additional reports are	attached:			
If you have received fees or mad				
If you have paid an honorarium oxpense Reimbursement	or reimbursed expenses, you m	ust file <b>Addendum B</b> – Rep	ort of Honorariums or	
If you, your firm, or your family	has made political contribution	ns, you must file Addendur	n C- Political Contributions	
Sworn Statement/Affirmation by L have read RSA 15, RSA 15-B, RSA nd complete to the best of my know Carine Dumit  Description  Description  Description	. 14-C and RSA 664 and herebledge and belief.	y swear or affirm that the fo		
(Signature of lobbyist)	.0400	(Date		
Carine Dumit		Dute	,	
(Print Name of Johnvist)				

### State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

# **Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:**

Name of Lobbying partnership, firm, or corporation: Carir	e Dumit
Name of Client (leave blank if Statement is for the partner	ship, firm, or corporation and not related to any
particular client): SolarCity	
Date of Report (check one):	
April 26, 2017   ✓ July 26, 2017   October 2	5, 2017 □ January 31, 2018 □
I have read RSA 15, RSA 15-B, RSA 664, the Statement the following Addendums submitted with that Statement submitted):	•
-	
O Addendum B(s).	
O Addendum C(s).	
I hereby swear or affirm that the foregoing information or complete to the best of my knowledge and belief.	the Statement and each Addendum is true and April 24, 2017
(Signature of lobbyist)	(Date)
Carine Dumit (Print Name of lobbyist)	

### L E A S E P R I N

T

### STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Carine Dumit				
II. Name of lobbyist's partnership, firm or corporation, if any:				
N/A				
(Name of partnership, firm or corporation)				
III. Name of Client SolarCity	Date 4/24/2017			
IV. Fees Received Indicate the gross amount of all fees received from the client identified abo to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greduced by any expenses:	ent relations, or public relations services			
a) Total of all fees received in this reporting period	a) \$ 462.70			
b) Total of all fees received this calendar year, pr ior to this reporting period (This should equal the total of all prior monthly reports for this calendar				
c) Total of all fees received to date (Add lines a and b)	c) \$ <u>462.70</u>			
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ <u>0.00</u>			
V. Expenses:  Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) to during the reporting period for salaries, benefits, support staff, and office individual expenses where the expenditure was of \$25.00 or less (for examplement has been been globbied, purchase of a ceremonial object given to a person being lobbied; an itemized statement of each individual expenditure made during this reany purpose not covered by (a) (for example: purchase of a meal with vaceremonial object to be given to the subject of lobbying with a value great restaurant expenses for a legislative reception). Expenses for honorarium contributions will be reported on separate addendums and should not be reported.	th client and if expenditures are made by the may be filed for the lobbyist(s)/firm. The aggregate total of all expenses paid expenses; (b) the aggregate total of all expenses; (b) the aggregate total of all expenses; (b) the aggregate total of all expenses; (b) that is given to the person bied with a value of \$25.00 or less); and porting period of greater than \$25.00 for alue of greater than \$25, purchase of a later than \$25, but not greater than \$50, expense reimbursement, or political			
<ul><li>a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.</li><li>b) Total aggregate of expenditures during this reporting period, not reported</li></ul>	a) \$ 0.00			
in a), of \$25 or less.	b) \$ <u>0.00</u>			
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ <u>400.91</u>			

d) Total expenses for this reporting period	d) \$ 400.91
(Add lines a, b and c)	
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ <u>0.00</u>
f) Total of all expenses year to date	f) \$ 400.91
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
Amtrak	\$ <u>138.00</u>
Boston Harbor Inn	§ 216.31
Enterprise Rent-A-Car	\$_46.60
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing information
is true and complete to the best of my knowledge and belief.	<b>8 8</b>
	April 94, 9017
(Signature of Jakharian)	April 24, 2017
(Signature of lobbyist)	(Date)
Carine Dumit	
(Print Name of lobbyist)	